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nd to a collection of information unless it contains a valid OMB control number Under the Paperwork Redu Complete if Known Substitute for form 1449A/B/PTO Application Number 10/560.341 INFORMATION DISCLOSURE May 28, 2004 Filing Date Randall C. Jenkines STATEMENT BY APPLICANT First Named Inventor N/A Art Unit (Use as many she ets as necessary) Examiner Name Not Yet Assigned 63093A US Attorney Docket Number 1 1 Sheet

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Examiner nitials*	Cite No.	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, When Relevant Passages or Relevan Figures Appear
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